



Nurse Corps News

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Nurse Corps Makes History

With the Navy Nurse Corps reaching a momentous milestone with its centennial birthday celebration this past May, another historic announcement of significance included the selection of CAPT Elizabeth Niemyer as the next Navy Nurse Corps flag officer. Commissioned in 1981, CAPT Niemyer's distinguished career accomplishments include serving as the Executive Officer and Commanding Officer for Naval Hospital Rota, Spain and the Executive Director for TRICARE Area Office—Europe. Her next assignment is Director, TRICARE Regional Office—West in San Diego, CA. CAPT Niemyer shared key highlights of her career to date and some lessons learned along the way.

Career Milestones

Question: What career milestones were most important in your career?

Answer: Looking back on my 27 year career, every job has been a building block for the next assignment. In the Nurse Corps, you start out learning the foundational skills of nursing and build on those basics. I've been able to do things that weren't necessarily available to nurses when I first entered the Navy; that's the beauty of the Nurse Corps and the benefit of changing times. For example, Nurse Corps officers couldn't hold command, and women were not routinely fulfilling operational roles in the early 1980s. Those changes are significant and have allowed for the expansion of opportunities in the Nurse Corps and the Navy. Overall, every single tour has been a good experience. It's important to remember, it is not the job, the location or the command itself that ensure success; it is what you do during your tour and how you accomplish it that matters.

Looking to the future: The opportunities and challenges ahead

Question: What opportunities and challenges lie ahead for the Nurse Corps?

Answer: I joined the Navy during peacetime which is an entirely different world than new nurses joining today experience. Anyone who joined during the last six to seven years



Rear Admiral (Sel) Elizabeth Niemyer

She will be promoted to Flag Rank on October 1, 2008

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Nurse Corps Makes History (Cont)

entered the service during a time of war and many have had the opportunity to practice wartime medicine. Consequently, we have had to look ahead to what we need to meet the mission and develop a different skill set than we needed even 10 years ago. Our nurses coming in today will likely experience operational nursing during their careers and need to be prepared to do so.

Considering the civilian nursing shortage, recruiting is and will continue to be a challenge. The Navy Nurse Corps has done well recruiting nurses and has exceeded our recruitment goals for new accessions for this fiscal year. Even so, every one of us in uniform is a recruiter and in order to stay ahead of the curve, we must continue to recruit the best and the brightest for the entire Navy Medical Department.

Another challenge ahead is promoting a joint environment. I believe increased joint collaboration is the future of the Military Health System (MHS). Each service brings a unique perspective to the joint environment which allows us to retain our service distinction, yet strengthen the overall MHS team.

Leadership philosophy

Question: How would you describe your leadership philosophy?

Answer: I would describe my leadership style as participatory but decisive. First and foremost, people are truly our most valuable asset, and it is our responsibility to take care of them. Secondly, I strongly believe the collective work of many is better than the work product of one completed in isolation. As I took on more senior leadership positions, such as Director, XO, and CO, I fully embraced the need to develop a strategic plan and to use it to move the organization forward. I like process management and believe if you understand the process, you'll also understand how to improve it.

Pearls of wisdom

I'm a follower of Stephen Covey's philosophy; for me that means being principle centered. For the past 14 years, I've had a personal mission statement, set personal and professional goals and strived to achieve them. All in all, I'd say this strategy worked. It really has helped me achieve personal and professional work-life balance. I am very fortunate to have tremendous family support.

Recently at the 100th Nurse Corps Birthday celebration, I had the opportunity to thank many former colleagues for their support of my career. I would like to use this interview opportunity to extend thanks to the many people with whom I have worked over the past 27 years. You really can't get to this point in your career without the help and support of others. I'd also like to pass on a piece of advice I was given about 15 years ago: "Bloom where you're planted." Don't get caught up in chasing a certain job or having a particular job title, but rather, focus more on doing the very best job you can in the role to which you're assigned.

For all nurses, embrace and explore every opportunity as there's something to be learned from every tour. The future is wide open—there are opportunities ahead that we haven't yet imagined. Anything is possible, but always follow your moral compass on your journey.

LCDR Christine C. Palarca, NC, USN



FST 5 Leads Expeditionary Medical Contingent to Guatemala



Fleet Surgical Team 5's CDR Khin Aungthen and Project Hope's Yolanda Castillo take some time to play with a small Guatemalan boy during a visit to Hospital Nacional de Escuintla to work with hospital staff as part of Continuing Promise (CP) 2008.

Fleet Surgical Team (FST) 5, embarked aboard USS Boxer (LHD 4), is making preparations to partner with several Latin American countries with medical aid and support ashore as part of Continuing Promise (CP) 2008. CP is an equal partnership mission combining partner nations and U.S. relief capabilities to help create a strong bond between them, while assisting neighboring countries. FST 5 is leading an expeditionary medical team of over 100 people. "We want to provide integrated complementary care and work side-by-side with the host nation professionals," said CAPT Louis Orosz, medical contingent commander. "That teamwork increases the credibility for both sides, the host nation and for us."

The team will work side-by-side with Latin American medical teams and non-governmental organizations (NGO) to provide many types of medical care in each of the countries Boxer is scheduled to visit during the ship's Humanitarian Civic Assistance (HCA) mission.

During the ship's first stop in Guatemala, the Boxer, FST 5, and partner nation representatives hope to treat as many as 1,000 people per day with medical care such as general health, optometry, dental, and minor surgeries. The team also brings the capability to provide veterinarian care, provide preventive medicine assessments

and conduct medical and nursing training, as well as bio-medical equipment repair.

The Boxer and FST 5 will also deliver over \$200,000 of pharmaceutical supplies for patients from partner nations and more than \$160,000 of disposable surgical supplies. "It took a huge effort to identify what we were going to need for the mission as well as to get it onboard, but I think we'll be ready for Guatemala," said HM3 (SW) Leo Carbajal, surgical supply coordinator for FST 5.

FST 5 will separate and deliver the supplies equally among Guatemala, El Salvador and Peru. "This mission is the essence of what corpsmen do," said HM3 (FMF) Rosalind Thomas, medical assistant for FST 5. "The HCA will also give us a chance to connect with the people and the countries we visit."

Embarked units and organizations aboard Boxer for CP include Amphibious Squadron 5, FST 5, Navy Seabee Construction Battalion Maintenance Unit 303, Helicopter Mine Countermeasures Squadron 14, Marine Medium Helicopter Squadron 764, Tactical Air Control Squadron 11, Helicopter Sea Combat Support Squadron 23, Assault Craft Unit 1, Beach Master Unit 1, and U.S. Public Health Service.

MC3 (SW) Porter Anderson
USS Boxer (LHD 4) Public Affairs



Joint Commission's Universal Protocol

It has been five years since the Joint Commission began requiring organizations to apply the steps of Universal Protocol for preventing wrong site, wrong procedure, and wrong person surgery through the implementation of a pre-operative verification process, operative site marking, and a "time out" immediately before the procedure's start. Universal Protocol was intended to mitigate the incidence of patient harm but wrong site surgeries ranked at the top of the Joint Commission's list of root causes in 2008. The degree of adherence to the time out procedure could be a factor in the continued rise of wrong site surgeries. Organizations are failing to properly implement all of the steps.

According to the Joint Commission's implementation expectations for Universal Protocol, the time out must: be conducted immediately before starting; be in the setting of the procedure; involve the entire operative team; use active communication; and be documented briefly, such as in a checklist. The time out must, at a minimum, include: correct patient identity; correct side and site; agreement on the procedure to be done; correct patient position; and availability of correct implants and any special equipment or special requirements. Finally, the organization should have processes and systems in place for reconciling differences in staff responses during the "time out." One recommendation is to have an outside observer monitor the time out process and provide feedback to ensure that all the required steps are being followed. For additional information, see: The Joint Commission (2008). Universal protocol guidelines. http://www.jointcommission.org/NR/rdonlyres/DEC4A816-ED52-4C04-AF8C-FEBA74A732EA/0/up_guidelines.pdf

CDR David Tait, NC, USN

USNS Comfort Takes Nursing Skills to Students

The Eric Williams Medical Science Complex, a teaching hospital that serves both patients and students, was the location of medical instruction conducted by training personnel attached to hospital ship USNS Comfort (T-AH 20) in Champs Fleurs, Trinidad and Tobago on September 18, 2007. Three U.S. Navy medical personnel and a U.S. Public Health Service nurse provided classes on pre-hospital trauma skills and accidents that happen away from home, sterile treatment of tools and supplies, dressing wounds, and intravenous administration and care. The classes were followed by hands-on practice.

"A lot of these students have had this training before and are able to comprehend what we are teaching," said HM2 Sam Hutcheson. "The teaching we are conducting helps to bridge the gap between us and their education – where we're the same, where we're different – and it allows us to learn from them. "One of the aspects of Comfort's four-month humanitarian deployment is training host-nation medical staff in areas selected by the nation's ministry of health community, aimed at leaving a positive impression after the ship and its crew has left. Maria Seecharan, a registered nurse from the nearby San Fernando General Hospital, thought the training had a positive effect. "The training today was not boring, like in a classroom. It was quite interesting and informative. The props that we could practice on – it is a thing I will remember. I will try to educate my colleagues that weren't here today and try to practice in a daily routine," Seecharan said.

One of the biggest differences at this training session versus previous sessions in other countries was that the instructors could speak to the audience without a translator. "This is the first English-speaking port we've been to," said LCDR Deborah Diehl, the assistant training officer aboard Comfort. "It has been a lot of fun teaching, because their response is immediate instead of waiting for a translator. I can see firsthand – I think they're learning a lot."

MC2 Elizabeth R. Allen



LCDR Deborah Diehl, NC, USN works with nursing students in Trinidad and Tobago.



National Naval Officers Association Celebrates its 36th Year

The National Naval Officers Association (NNOA) celebrated its 36th annual professional development and training conference on July 23-26, 2008 in Portsmouth, VA. This year's theme, "Developing America's Future Leaders to Enhance Mission Readiness and Cultural Awareness," drew record numbers of over 450 officers from around the world.

Dynamic presentations from the top leaders of the Sea Services focused on the recruitment and retention of diversity talent in the officer ranks of the United States Coast Guard, Navy and Marine Corps. The Navy Nurse Corps presence did not go unnoticed and was especially marked by the attendance of the Navy Surgeon General, VADM Robinson and RADM Bruzek-Kohler, Director of the Nurse Corps. RADM Bruzek-Kohler is also the first Nurse Corps Director to attend the NNOA conference. Medical Department officers in attendance welcomed the words of wisdom from both keynote speakers who together highlighted the importance of the military health care mission, why we wear the uniform, and strategic career guidance.

RADM Bruzek-Kohler encouraged Navy Nurses to evaluate how they demonstrate leadership beyond their clinical

practice and to view mentorship as a "two-way street" and a "full-time job." She continued that while the Navy Nurse Corps has exceeded its recruiting goal for this fiscal year, we, as Navy nurses, are especially challenged to continue recruiting by wearing our uniforms to civilian forums and most of all by sharing our story. In closing, VADM Robinson pointedly shared that in the Navy we are really like family, because we provide care in a very personal and close way and "when people are affirmed and loved we will have success."

Visit www.nnoa.org for more information about its important mission to actively support the Sea Services in the development of a diverse officer corps through recruitment, retention, and career development. Join the hundreds of members dedicated to NNOA's mission year round. We look forward to seeing you at next year's conference.

LCDR Gayle L. Walker, NC, USN



Above: Navy Nurses welcome the Navy Surgeon General VADM Robinson and RADM Bruzek-Kohler, the first Nurse Corps Director to attend the NNOA Conference.

Stay Informed Via the Nurse Corps Homepage

Have you logged into NKO recently to see the newly revised Nurse Corps homepage? Check out the website for the latest information on the Nurse Corps, including:

- ✦ Naval Hospital Corps School Curriculum (HM "A") Handbook, Workbook, and Performance Checklists (PCLs) have been posted to the "Reading List".
- ✦ A revised retirement list has been uploaded to the "Force Structure and Promotion Boards" page.
- ✦ The "Mentoring" page has debuted and features information regarding NC 21 Leadership and Training.
- ✦ A large number of updates have been uploaded to the "Detailers and Billet Opportunities" page including (but not limited to) new hotfill and time sensitive billet openings plus service school information.
- ✦ The date DUINS packages are due has been extended. Please refer to the "DUINS" section on the "Recruitment & Retention" page for more information.
- ✦ To log on to NKO: <https://wwwa.nko.navy.mil/portal/splash/index.jsp>



Bravo Zulu!



Bravo Zulu to CDR Alison J. Eagleton, Operational Health Support Unit San Diego who passed her CPHRM (Certified Professional HealthCare Risk Manager) exam.

Bravo Zulu to LCDR Wendy Cook, Naval Hospital Bremerton who was awarded the University of Iowa Health Care 2008 Colleen J. Goode Research into Practice Poster Award for the outstanding poster presented at the UIHC National Evidence-Based Practice Conference.

Bravo Zulu to LT Brian Barber of US Naval Hospital Guam who recently obtained his CCRN and is currently deployed on the Mercy.

Bravo Zulu to LCDR David Crumbley, CNS for the Inpatient Surgical Unit at National Naval Medical Center Bethesda who recently published the attached article in WOCN. [u](#)

Bravo Zulu to LTJG Gabrielle Crane, Ensign Jessica Fahl, LCDR Stacia Fridley from National Naval Medical Center Bethesda who recently received a certification in Wound Care through the National Alliance of Wound Care.

Bravo Zulu to the nurses selected to attend the Perioperative Nurse 101. Please congratulate the following officers as the selection process was very competitive. These selected officers were recognized for their outstanding performance and future potential:

LTJG Stephanie Paone , NC, USN, NH Jacksonville
LT Alayna Schwartz , NC, USN, NH Guam
LTJG Christine Burns, NC, USN, NH Guam
LTJG Regina Grice, NC, USN, NH Guantanamo Bay
LTJG Bettina Sanders, NC, USN, NMC Portsmouth
LTJG Jeffery Rockett, NC, USN, NMC Portsmouth

NC Live VTC Update

The next NC Live VTC is scheduled for Thursday, 25 Sept at 1300 EST. The topic will be the Family Nurse Practitioner community. CDR Cindy Kuehner, FNP specialty leader, will provide latest updates on this community. The registration deadline is 10 Sept.

Our October VTC will be on career guidance and promotion boards. Our November VTC will be devoted to the semi-annual All-Hands VTC with RADM Bruzek-Kohler, Director of the Navy Nurse Corps. In anticipation of the winter holiday schedule, there will be no NC Live VTC in December.

Career Development Tools for Reservists

Attention Reservists: Please view the latest NR Career Development Tools Communiqué #8 on NKO. This issue features:

- * Navy Reserve List Serve: A career information tool & more.
- * CAC: Are you ready?
- * Reserve testing team assesses beta CMS/ID upgrade.
- * How to volunteer for mobilization.
- * Q&A: Retirement points & drill weekends.



In Memory of Rear Admiral Nancy Fackler

Rear Admiral Nancy Fackler, NC, USN (Ret) passed away on April 29, 2008 after a long battle with Alzheimer's Disease. She died at the North Florida Specialty Care Center nursing home, in Gainesville, at the age of 67. Rear Admiral Fackler was commissioned as an Ensign in the US Navy Nurse Corps in 1962. She retired on August 24, 1997 with the rank of Rear Admiral and the position of Deputy Director of the Navy Nurse Corps for Reserve Affairs.

Her career began with a tour on active duty at Chelsea Naval Hospital in Massachusetts. In 1967, she volunteered to return to active duty at the US Naval Hospital in Yokosuka, Japan, where she worked as Charge Nurse in the intensive care unit caring for the severely wounded, mostly from the DaNang area of Vietnam. Rear Admiral Fackler remained in the Reserves and continued her education; earning a Masters Degree in Public Administration from Golden Gate University in 1991 and becoming certified in Gerontology at the University of Florida in 1994.

In 1996, Rear Admiral Fackler was diagnosed with degenerative dementia of Alzheimer's type. After retirement in 1997, she sought to provide some hope for future Alzheimer's victims by supporting research in this area. Rear Admiral Fackler and her husband, Marty, donated their house in Hawthorne, Florida to the University of Florida Foundation. The proceeds from the sale of the house started the Nancy A. Fackler Endowment at the McKnight Brain Institute at the University of Florida. Anyone who wishes to remember Rear Admiral Fackler in the form of a donation to support research, that someday might prevent the disease that took her, can send it to:

UF Foundation Records

P. O. Box 14425

Gainesville, FL 32604

(Make check out to: UF Foundation - Nancy A. Fackler Endowment)



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THE DUINS TIMELINE

Where are you in the process of applying for DUINS?

Deadline date has been extended to Sept 19.

Mail DUINS application to Naval Medical Education and Training Command (NMETC), (0GNC)

Want to write a news article for Nurse Corps News?

Submit your article via your chain of command to:

LCDR Kathleen Harlow, NC, USN

Editor, Nurse Corps News

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